

The Enrollment Process for BAYOU HEALTH

October 14, 2011

Agenda

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- Who does MAXIMUS serve
- Moving from FFS to Managed Care
- Goals of your Enrollment Broker
- BAYOU HEALTH Roll-out
- BAYOU HEALTH Enrollment Process
- How you can help

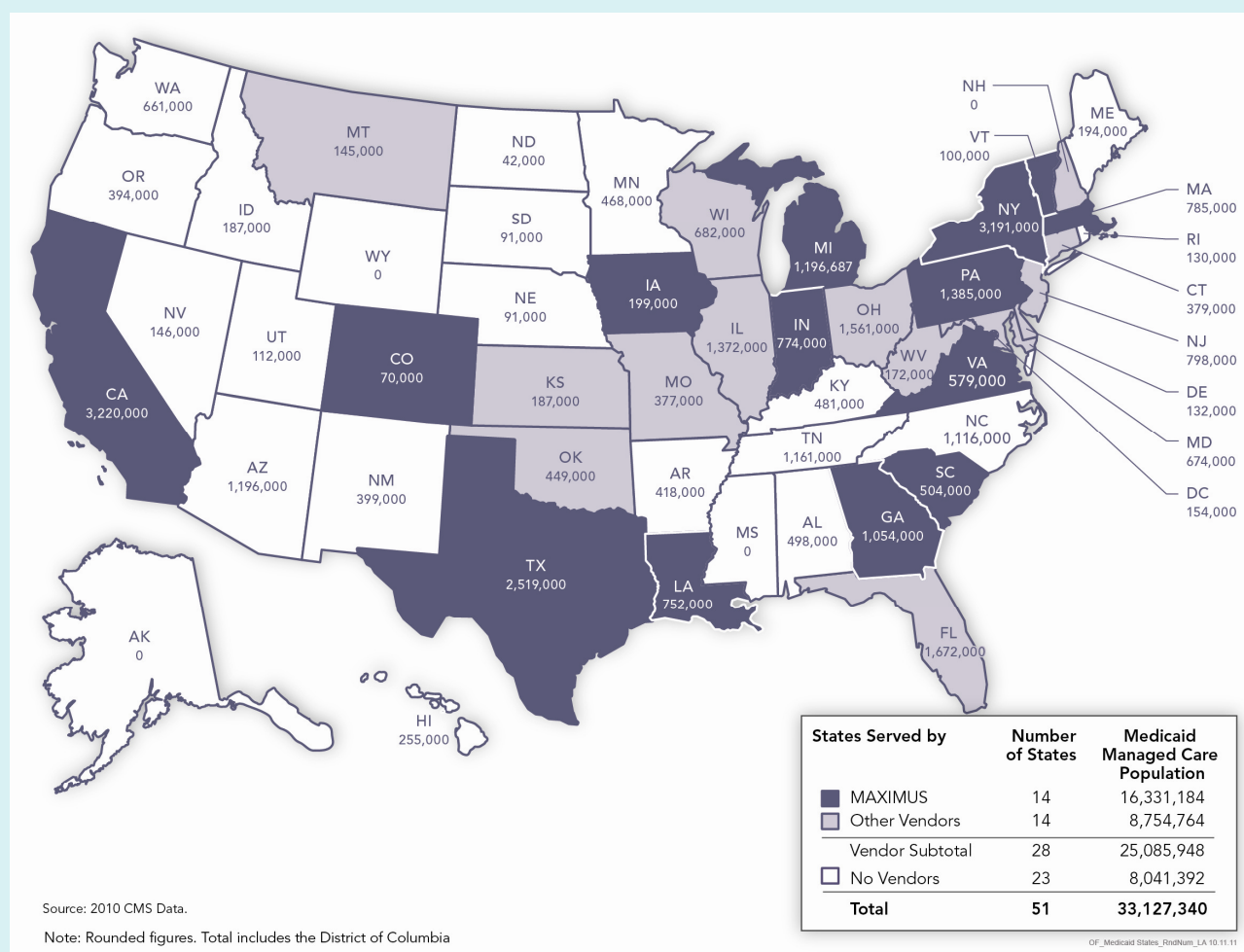


Who is MAXIMUS?



MAXIMUS Serves Medicaid Beneficiaries

- **Medicaid Managed Care Support**
 - Enrollment Broker in 14 states
 - 65% of the managed care enrollment market served by vendors
 - Serve 1:2 Medicaid managed care beneficiaries nationally
- **Core services**
 - Outreach, education, health literacy
 - Choice counseling & enrollment
 - Customer service call center
 - Provider directories & management



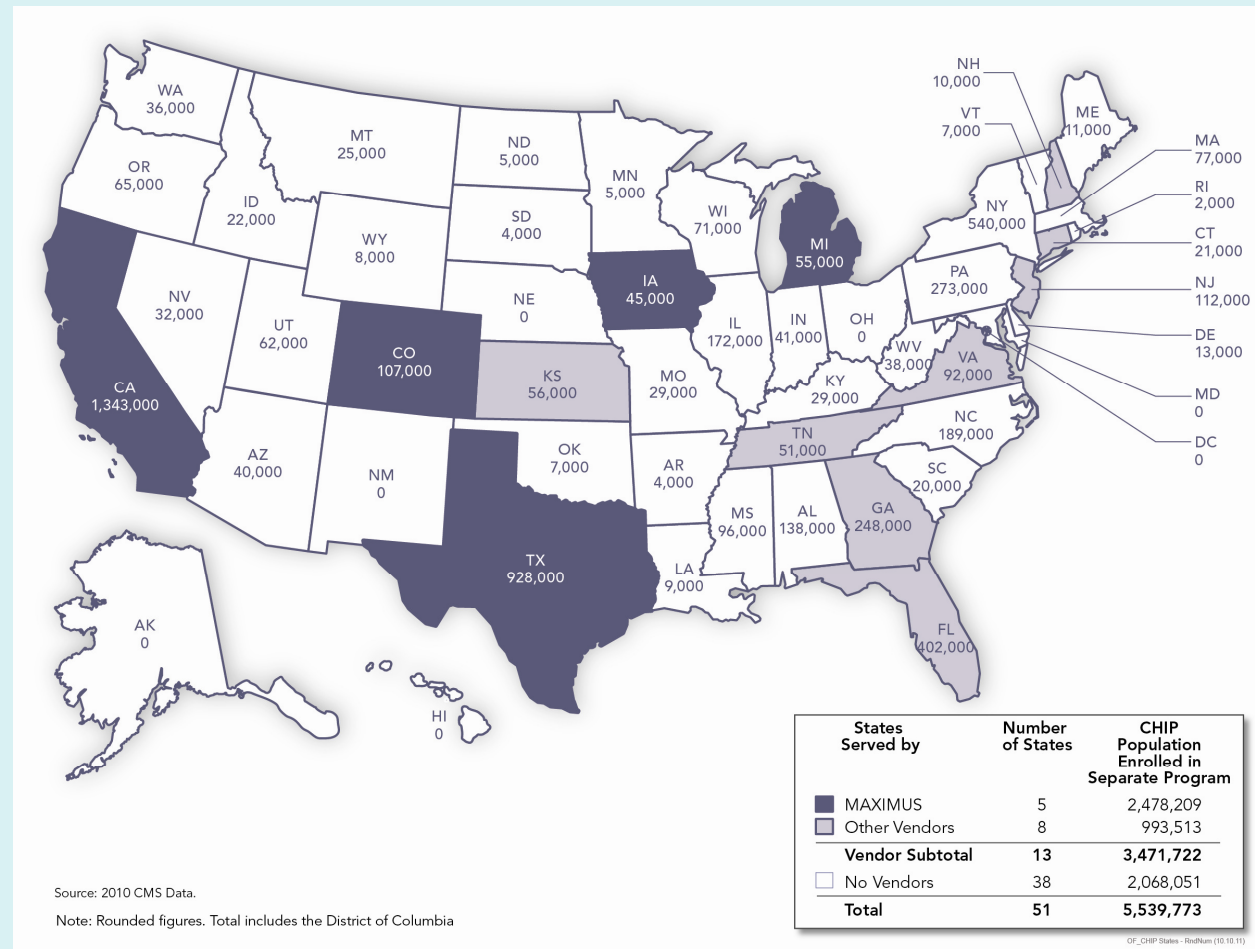
Health Services – CHIP Eligibility & Enrollment

- **CHIP Program Administration**

- CHIP provider in 5 states
- 68% of market served by third party administrators

- **Core services**

- Customer service call center
- Intake, eligibility determination & case maintenance
- Premium billing, payment processing
- Outreach, provider and health plan enrollment, health literacy
- Self-service portals



A Focus on the Consumer Experience

All Content Written at the 6th Grade Level

- Plain language writing

Web Design

- Simple, clear navigation with uncluttered, appealing graphic design
- Compliance with section 508/504 & W3C
- Online help content and assistance functions

Usability and Community Testing

- Ensures that your health information materials are easy to read, easy to use, and culturally relevant

Multi-language Support & Translation Services

- Translate materials into any language, and adapt translations for readers with limited literacy skills



Moving from Fee for Service (FFS) To Managed Care

Moving from FFS to Managed Care

- Medicaid programs have undergone tremendous changes over the past 10 years, including shifts in federal and state priorities, technological and pharmaceutical innovations, population and demographic changes, and rising costs.
- Currently, managed care is the most common health care delivery system in Medicaid with more than two-thirds of all Medicaid beneficiaries enrolled in some form of managed care, with an emphasis on preventative care— mostly, traditional (HMO) and primary care case management (PCCM) arrangements.
- MAXIMUS provides services to 65% of those beneficiaries in managed care that are served by vendors.
- MAXIMUS has gained insight into some areas of concerns during transitions and can offer some observations/mitigations.



Moving from FFS to Managed Care

• **Member Concerns**

- How does this impact me?
- Lack of understanding about managed care and mistrust of government representatives.
- Can I change my plan if I make a “wrong” choice?
- Can I keep or change my doctor?
- Can I still get my same medications?

Member Mitigations

- Simple, clear, consistent messages from **all** trusted community sources.
- Emphasize the 90 day opportunity to change plans at every opportunity.
- Most providers are participating with at least one health plan. Talk to your doctor or check the website to find out which one or call BAYOU HEALTH to speak with an enrollment counselor.
- Identify informal leaders and trusted community sources that members seek out for validation.
- Advocates are critical members of community network to deliver the message of improved access to care and better health outcomes.

Moving from FFS to Managed Care

Provider Concerns

- How can I keep my patients?
- Do I have to join a plan?
- What plans are participating in my region?
- How do I sign up with a health plan?

Provider Mitigations

- Conduct provider support education and information sessions.
- Train staff in provider offices to specifically help enrollees make a selection or to direct the beneficiary to contact BAYOU HEALTH immediately to choose a health plan.
- Have informational and member friendly choice aids available in provider offices.
- In BAYOU HEALTH all five health plans participate statewide.
- Health plans should outreach to the provider community.

Moving from FFS to Managed Care

- **General Concerns**

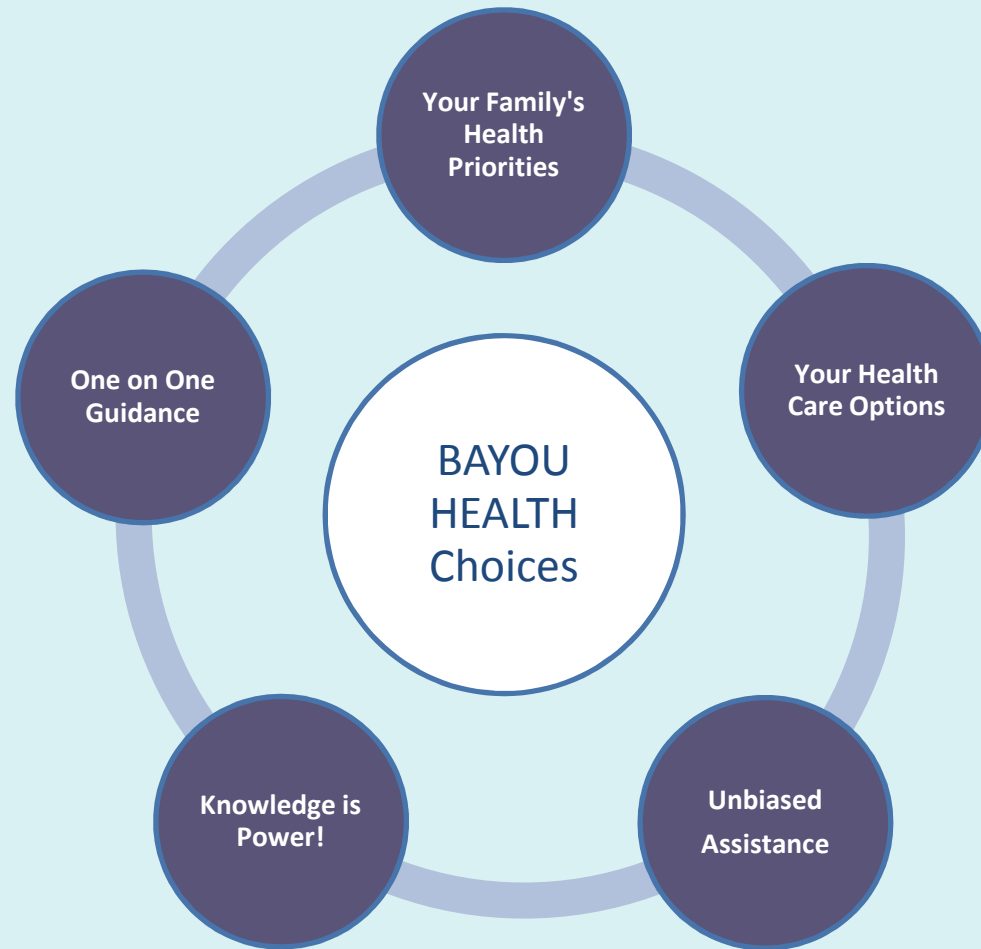
- What is the impact of outreach activities?
- How are members notified of program?
- How do I find out about BAYOU HEALTH?
- What impacts voluntary choice rate?

- **General Observations**

- Outreach events are important to generate overall knowledge of program and to generate good will in the community.
- Clearly designed and readable materials are key to member communications.
- Marketing media campaigns targeted to specific regions, specific populations and specific demographics (urban vs. rural) – one size does not fit all.
- Combination of mailings and direct calling to members is optimal outreach methodology.
- Limited provider options and lack of access can be a deterrent to members making a choice.

Goals of Your Enrollment Broker

Goals of BAYOU HEALTH Enrollment Broker



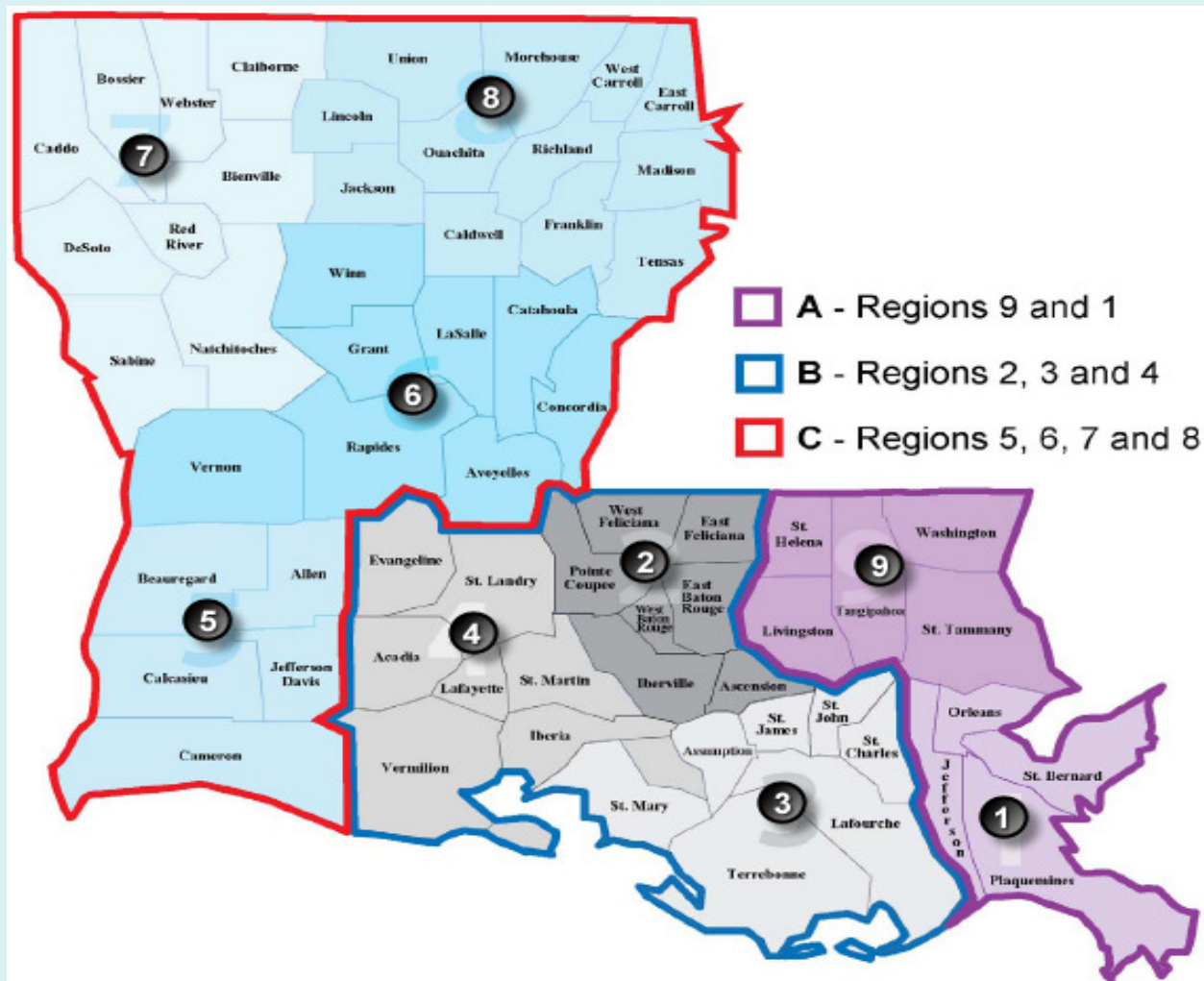
BAYOU HEALTH Rollout

BAYOU HEALTH Rollout

BAYOU HEALTH will be rolled out by Geographical Service Areas in three phases. Information line will open 12/1/11.

	Begin Taking Enrollments	Effective Date
GSA A – Regions 1 & 9	12/15/11	2/1/12
GSA B – Regions 2, 3, & 4	2/15/12	4/1/12
GSA C – Regions 5, 6, 7, & 8	4/16/12	6/1/12

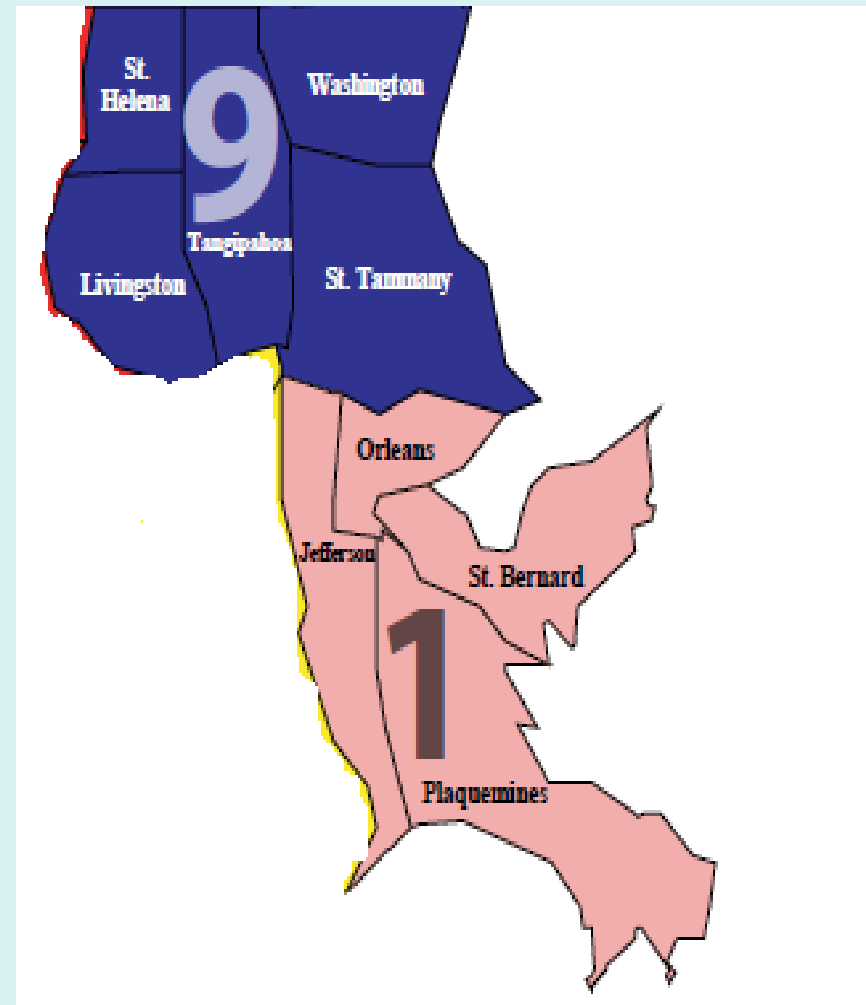
BAYOU HEALTH Rollout



BAYOU HEALTH Rollout

Phase I

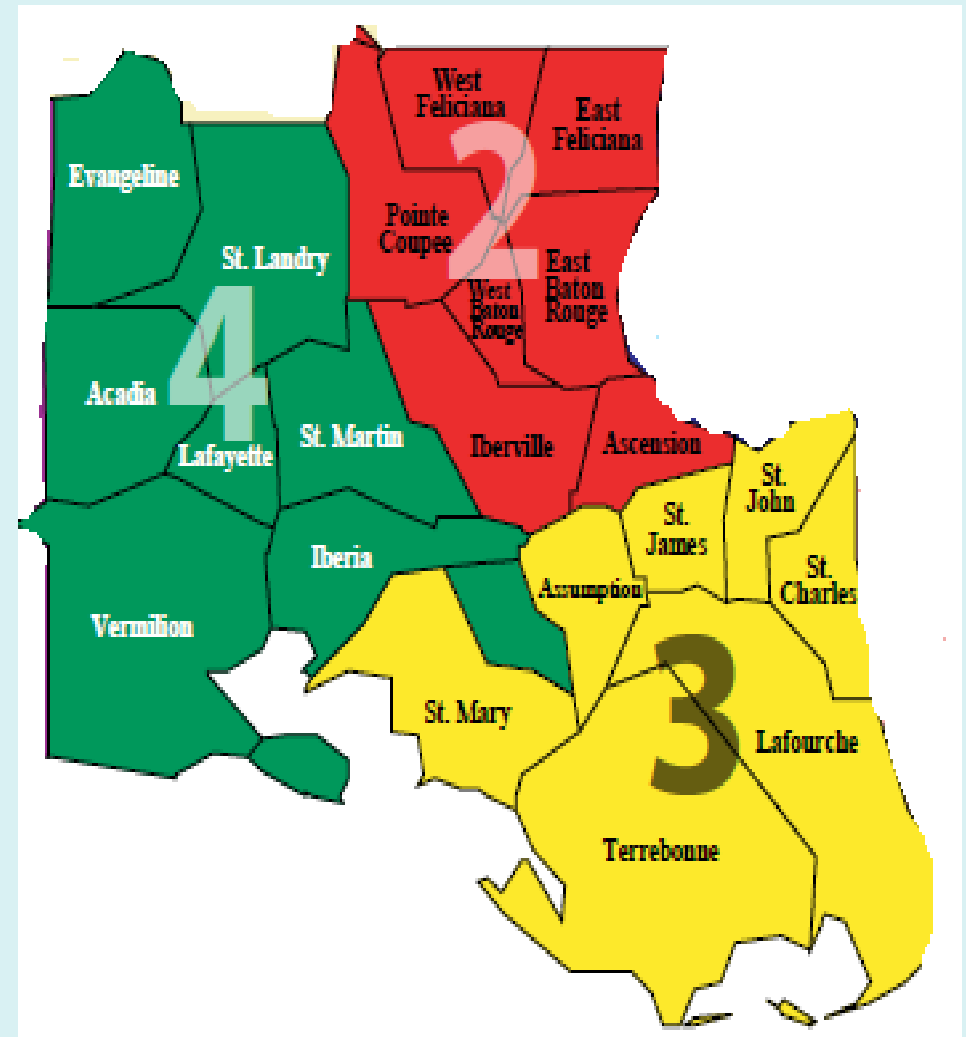
12/01/11	BAYOU HEALTH Information Lines Open
12/15/2011	Enrollment Center begins to accept enrollments
12/15/2011	Choice letters mailed to enrollees in GSA-A (New Orleans and Northshore Regions)
2/1/2012	Go-live date for enrollees in GSA-A



BAYOU HEALTH Rollout

Phase II

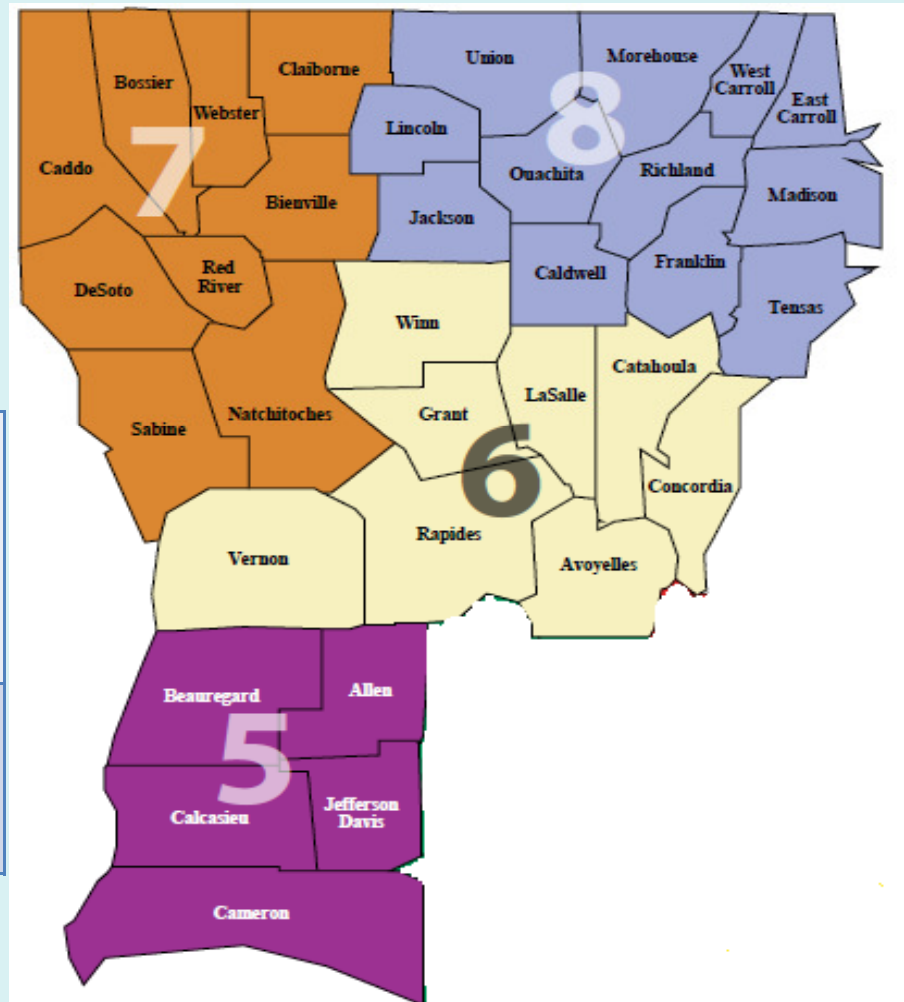
2/15/2012	Choice Letters mailed to enrollees in GSA-B (Capital area, South Central, & Acadiana Regions)
4/01/2012	Go-live date for enrollees in GSA-B



BAYOU HEALTH Rollout

Phase III

4/16/2012	Choice Letters mailed to enrollees in GSA-C (Southwest Louisiana, Central and North Regions)
6/01/2012	Go-live date for enrollees in GSA-C



BAYOU HEALTH Enrollment Process

BAYOU HEALTH Enrollment Process

Initial Enrollment Period: The first 30 days

- Enrollment packets are mailed to eligible enrollees in each Geographical Service Area.
- Ongoing enrollment packets are mailed daily to newly eligible Medicaid enrollees.
- From the date of the mailing, there is a 30 day opportunity for potential enrollees to choose a health plan or choose to stay in Fee-for-Service Medicaid if they are part of the voluntary population.
- If potential enrollees do not choose a plan or Fee-for-Service Medicaid, they are assigned to a plan.

BAYOU HEALTH Enrollment Process

Reminders

- Beginning six days after the initial enrollment packet is sent, outbound calls are made to remind and encourage eligible enrollees to make a plan choice.
- Every potential enrollee who has not yet made a choice receives a series of outbound calls until the assignment date.
- Assignment occurs daily 30 days after the Welcome Package mail date.



BAYOU HEALTH Enrollment Process

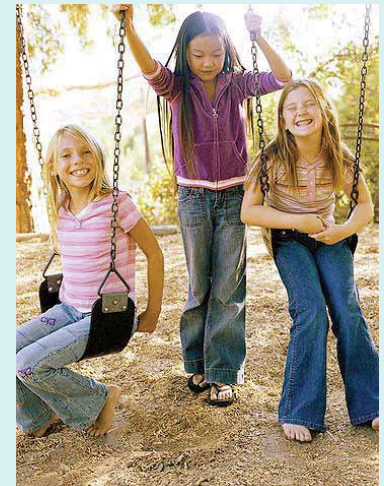
Auto Assignment

- On a daily basis, all potential enrollees who have exhausted their 30 day enrollment period and have not chosen a health care option are assigned into a health plan.
- The assignment process places eligible enrollees into health plans available in the GSA where they live based on the following criteria:
 - Search for a relationship between a health plan and the potential enrollee, or an enrollee family member starting with the youngest family member
 - *A recent health plan relationship*
 - *Last Community Care PCP if applicable*
 - *Based on 12 months of claims history*
 - *A recent PCP relationship*
 - *A recent specialist relationship*
 - *A recent hospital relationship*

BAYOU HEALTH Enrollment Process

Assignments (Continued)

- If there is no health plan identified by using the first two criteria, there is a random assignment round robin to all available health plans.
- All Plan enrollments, except newborns, start on the 1st of the month. Newborn enrollments begin on the date of birth. All disenrollments occur on the last day of the month.



BAYOU HEALTH Enrollment Process

Choice Period: The first 90 days

- Members have 90 days after enrolling in a health plan to transfer to another plan of their choice. Members may change plans as many times as they need to within this 90 day period.

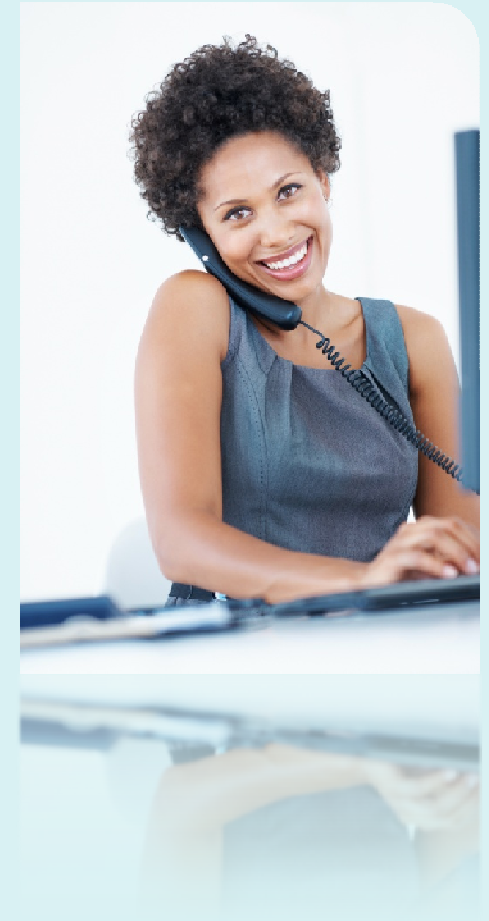
Continuous Enrollment Period: One year

- After the 90-day Choice Period has expired, members stay in their health plan until their annual open enrollment period (unless they have a special reason to make a change).

BAYOU HEALTH Enrollment Process

There are five easy ways for members to enroll:

1. Enroll by mail by completing the paper form in the welcome packet and sending it to us in the postage paid envelope.
2. Enroll by completing the paper form in the welcome packet and faxing it to BAYOU HEALTH, the number will be on the welcome letter.
3. Enroll online at the BAYOU HEALTH website, www.BAYOUHEALTH.com.
4. Enroll over the phone, by calling the BAYOU HEALTH toll-free number, 1-855-BAYOU4U (1-855-229-6848) and utilizing the IVR.
5. Enroll over the phone, by calling the BAYOU HEALTH toll-free number, 1-855-BAYOU4U (1-855-229-6848) and speaking with an enrollment counselor.



BAYOU HEALTH Enrollment Process

Julie's Story

Julie is a young working mother living in Jonesboro. When she received her Welcome Packet, Julie applied her online skills to choose a health plan for her family. Since one of her daughters has severe ear infections, and the other has Type 1 diabetes Julie utilized the interactive provider search at www.BAYOUHEALTH.com to search for specialists in the Shreveport and Jonesboro areas. Sarah found a health plan that includes several health care providers whom she has come to rely on and trust for her daughters' medical issues. She completed her enrollment online, and her daughters now have the medical care they need.



BAYOU HEALTH Enrollment Process

Amelia's Story

Amelia and Juan, a young couple, live in Ascension Parish. While pregnant Amelia applied for Medicaid for herself and their new baby and was determined eligible. As part of the eligibility process, she also learned that she would need to select a health plan and family doctor, decisions that were unfamiliar and uncomfortable to her. With considerable fear and anxiety, she called the BAYOU HEALTH enrollment center without any clear idea of what to expect. A well-trained MAXIMUS Enrollment Counselor began by asking about her relationship with the doctor who delivered her baby.



BAYOU HEALTH Enrollment Process

Amelia's Story Continued

Without ever sounding rushed, the Counselor carefully explained how the health plan would provide a set of services ideally suited to her needs and those of her baby girl, with her primary care doctor making sure that all of the immunizations and screens took place when they were needed.

Before the conversation was over, Amelia chose a health plan that included the hospital where she delivered her baby and a pediatrician who was strongly recommended to her by a trusted friend and neighbor. Just as important, she came away from the conversation with a new appreciation for how to keep herself and her baby healthy.

How Can YOU Help?

How Can YOU Help?

- Keeping your office well stocked with BAYOU HEALTH brochures, posters and the health plan comparison chart.
- Asking your clients who have Medicaid or LaChip coverage if they have selected a health plan through BAYOU HEALTH.
- Encouraging your clients to use one of the five easy options to select a health care plan if they have not done so already.
- Encouraging your clients to call BAYOU HEALTH's toll free number for more information 1-855-BAYOU4U (1-855-229-6848) or visit us on the web at www.BAYOUHEALTH.com.
- Explaining to your client that if they do not choose, they will be placed in a health care plan they might not like or want and, that they might not be able to see their doctor.
- Encouraging your clients to pay attention to mail from BAYOU HEALTH.

